

CITY FEE \$.
STATE	
3% FEE \$.
DEPOSIT \$.
TOTAL \$.

CITY OF BROOKLYN
 7619 Memphis Avenue, Brooklyn, OH 44144
ELECTRICAL
 APPLICATION FOR PERMIT
PRINT CLEARLY

PERMIT # _____

APPLICATION # _____

SITE ADDRESS _____ LOT SIZE _____ x _____

OWNER _____ OWNER ADDRESS _____

LOT/PP# _____ - _____ OWNER PHONE # (____) _____ - _____

CONTRACTOR COMPANY NAME _____

ADDRESS _____ PHONE (____) _____ - _____

CITY _____ PAGER/CELL # (____) _____ - _____

PROJECT NAME _____ SQ. FOOTAGE _____

PRESENT USE: <input type="checkbox"/> ACCESSORY STRUCTURE <input type="checkbox"/> APT. BLDG. <input type="checkbox"/> COMM. BLDG. <input type="checkbox"/> STORE
<input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OFFICE <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> RESTAURANT <input type="checkbox"/> VACANT LAND
PROPOSED WORK: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION/REPAIR <input type="checkbox"/> # _____ DWELLING UNITS
<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> ASSEMBLY/RECREATION <input type="checkbox"/> BUSINESS/PROFESSIONAL <input type="checkbox"/> CHURCH/RELIGIOUS
<input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> GARAGE <input type="checkbox"/> MERCANTILE/STORE <input type="checkbox"/> RESTAURANT <input type="checkbox"/> OTHER

PROPOSED WORK TO BE PERFORMED: # _____ SQUARE FOOT ELECTRICAL <input type="checkbox"/> TEMPORARY SERVICE <input type="checkbox"/> LIGHTED SIGN (Requires \$30.00 Building Permit also) <input type="checkbox"/> GENERATOR <input type="checkbox"/> SECURITY SYSTEM <input type="checkbox"/> UNDERGROUND FEEDERS (Hourly Rate Inspection) <input type="checkbox"/> SOUND/COMMUNICATION SYSTEM <input type="checkbox"/> SITE LIGHTING <input type="checkbox"/> CCTV/MATV <input type="checkbox"/> PERM SERVICE <input type="checkbox"/> OTHER <input type="checkbox"/> FIRE ALARM (Requires State Fire Protection License)

DESCRIPTION OF WORK: _____

PROJECT COST: \$ _____

APPLICANT NAME: (PRINT) _____

APPLICANT SIGNATURE: _____

DO NOT WRITE BELOW THIS LINE

Other permits required? _____ Application Status: ☐ OPEN ☐ DENIED ☐ PENDING

ADDITIONAL COMMENTS: _____

Amount Due: \$ _____ **Amount Paid: \$** _____ **(Cash / Check #** _____ **)**

MasterCard / VISA#: (circle one) _____ Exp. Date: _____ / _____

Billing Address: _____ Zip: _____ **Approved By:** _____ **Date:** _____ / _____ / _____